

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 09/826 765

PLANO DATE

APPLICANT(S)

CLAIMS

1	AS FILED		ADDITIONAL AMENDMENT		ADDITIONAL AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
10						
11						
12						
13						
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50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

1	IND	DEP	1	IND	DEP	1	IND	DEP
51								
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100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								